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Commissioner For Patents
PO Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

Attached please find an Amendment/Response for Docket No. 01898-25808.US,
Application No. 10/505,289.

Thank you. We await your confirmation of receipt.

Respectfully submitted,

Gary P. Oakeson
THORPE NORTH & WESTERN, LLP
Customer No. 20,551
Reg. No. 44266

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PTO/SB/21 (04-07)

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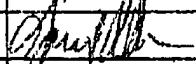
Total Number of Parties in This Submission

Application Number	10/505,289
Filing Date	7/14/2005
First Named Inventor	Brian Jones
Art Unit	1797
Examiner Name	Ernest G. Therkorn
Attorney Docket Number	01898-25808.US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.63	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): _____
<input type="checkbox"/> Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Thorpe North & Western, LLP		
Signature			
Printed name	Gary P. Oakeson		
Date	08/18/2008	Reg. No.	44286

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Signature			
Typed or printed name	Brenda Wiseman	Date	08/18/2008

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FAX NO. 8015660750

Serial No.: 10/505,289
Docket No.: 01898-25808.US

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

ART UNIT: 1797
EXAMINER: Ernest G.Therkorn
FIRST NAMED
INVENTOR: Brian Jones
SERIAL NO.: 10/505,289
FILED: 7/14/2005
CONF. NO.: 5179
FOR: MOBILE PHASE TREATMENT FOR CHROMATOGRAPHY
DOCKET NO.: 01898-25808.US

**CERTIFICATE OF MAILING
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Brenda Wiseman
Brenda Wiseman

THORPE NORTH & WESTERN, LLP
Customer No. 20,551
P.O. Box 1219
Sandy, Utah 84091-1219

AMENDMENT / RESPONSE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action, mailed July 2, 2008, Applicants offer the following
Amendment and request reconsideration of the above-captioned application.

AUG-18-08 MON 03:18 PM THORPE NORTH & WESTERN

FAX NO. 8015660750

Serial No.: 10/505,289
Docket No.: 01898-25808.US

INTRODUCTORY COMMENTS FOR AMENDMENTS

Please amend the claims in the manner indicated below. In the following amendments, an underline is used to indicate added text, and strikeouts are used to indicate deleted text.

Brackets may also be used for deleted text or characters when strikeouts are not sufficiently clear, e.g., such as striking out a hyphen.

Claims 1, 9, and 10 are currently amended to clarify previously presented limitations regarding the location of heating or cooling. The amendments find support in the specification at page 5, lines 4-8, and in Figure 2.